

JC695 U.S. PTO
12/05/01

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12-10-01

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032
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A

UTILITY PATENT APPLICATION TRANSMITTAL

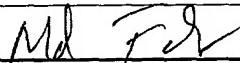
(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. CL1709 US NA

First Inventor BRAMUCCI ET AL

Title RHODOCOCCUS CLONING AND EXPRESSION VECTORS

Express Mail Label No. EL073739027 US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231		
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)		
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>		
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 57]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 		a. <input checked="" type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input checked="" type="checkbox"/> paper – SEQUENCE LISTING – 34 PGS c. <input checked="" type="checkbox"/> Statements verifying identity of above copies		
ACCOMPANYING APPLICATIONS PARTS				
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))				
10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee)</small> Attorney				
11. <input type="checkbox"/> English Translation Document (if applicable)				
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS <small>Citations</small>				
13. <input type="checkbox"/> Preliminary Amendment				
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>				
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>				
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 <small>(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</small>				
17. <input type="checkbox"/> Other: _____				
18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76.				
<input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) <small>Prior application information: Examiner _____</small>		<small>of prior application No: _____ / _____ Group / Art Unit: _____</small>		
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.				
17. CORRESPONDENCE ADDRESS				
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		 23906 <small>PATENT TRADEMARK OFFICE</small>	<small>or</small> <input type="checkbox"/> Correspondence address below	
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Name (Print/Type) <input type="text"/>		Registration No. (Attorney/Agent) <input type="text"/>		36, 506
Signature 		Date <input type="text"/>		12/15/01

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 2082

Complete if Known

Application Number	CL1709 US NA
Filing Date	CONCURRENTLY HEREWITH
First Named Inventor	BRAMUCCI ET AL.
Examiner Name	UNKNOWN
Group / Art Unit	UNKNOWN
Attorney Docket No.	CL1709 US NA

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Order Other None Deposit Account:

Deposit Account Number

04-1928

Deposit Account Name

E. I. du Pont de Nemours and Company

The Commissioner is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity

Small Entity

Fee Description

Fee Paid

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	740
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$ 740

2. EXTRA CLAIM FEES

Total Claims	-20	=	31	X	18	=	558
Independent Claims	9	-3	=	6	X	84	= 504
Multiple Dependent	<input checked="" type="checkbox"/>				X	280	= 280

Large Entity

Small Entity

Fee Description

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
109	84	209	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 1342

*or number previously paid, if greater; For Reissues, see above

3. ADDITIONAL FEES	Large Entity	Small Entity	Fee Description	Fee Paid
	Fee Code	Fee (\$)	Fee Code	Fee (\$)
	105	130	205	65
	127	50	227	25
	139	130	139	130
	147	2,520	147	2,520
	112	920*	112	920*
	113	1,840*	113	1,840*
	115	110	215	55
	116	400	216	200
	117	920	217	460
	118	1,440	218	720
	128	1,960	228	980
	119	320	219	160
	120	320	220	160
	121	280	221	140
	138	1,510	138	1,510
	140	110	240	55
	141	1,280	241	640
	142	1,280	242	640
	143	460	243	230
	144	620	244	310
	122	130	122	130
	123	50	123	50
	126	180	126	180
	581	40	581	40
	146	740	246	370
	149	740	249	370
	179	740	279	370
	169	900	169	900

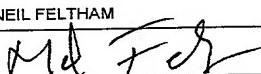
Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 0

SUBMITTED BY

Name (Print/Type)	S. NEIL FELTHAM	Registration No. Attorney/Agent	36,506	Telephone	302-992-6460
Signature				Date	12/5/01

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